



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
IN 981957608

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Avon Dump Site		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER RR & School Yard			
03 CITY Avon	04 STATE IN	05 ZIP CODE 46168	06 COUNTY Hendricks	07 COUNTY CODE 063	08 CONG DIST 06
09 COORDINATES LATITUDE 39° 45' 40"__		LONGITUDE 086° 23' 00"__			
10 DIRECTIONS TO SITE (Starting from nearest public road) Brownsburg, IN					

Intersection of US 36 and SR 267

III. RESPONSIBLE PARTIES

01 OWNER (If known) Avon Community School Corp.		02 STREET (Business, mailing, residential) 13013 W. Rockville Road			
03 CITY Indianapolis	04 STATE IN	05 ZIP CODE 46234	06 TELEPHONE NUMBER (317) 272-2920		
07 OPERATOR (If known and different from owner) Hubert Haynes		08 STREET (Business, mailing, residential) 13013 W. Rockville Road			
09 CITY Indianapolis	10 STATE IN	11 ZIP CODE 46234	12 TELEPHONE NUMBER (317) 272-5109		
13 TYPE OF OWNERSHIP (Check one) <input type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input checked="" type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☐ A. RCRA 3001 DATE RECEIVED: \_\_\_\_/\_\_\_\_/\_\_\_\_ MONTH DAY YEAR ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: \_\_\_\_/\_\_\_\_/\_\_\_\_ MONTH DAY YEAR ☒ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 10 / 23 / 87 MONTH DAY YEAR <input type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION BEGINNING YEAR NA ENDING YEAR NA <input type="checkbox"/> UNKNOWN			

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

None

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

None

EPA Region 5 Records Ctr.



289617

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)  
☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☒ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT Harry Atkinson		02 OF (Agency/Organization) IDEM		03 TELEPHONE NUMBER (317) 232-8927	
04 PERSON RESPONSIBLE FOR ASSESSMENT Alan Freed AF		05 AGENCY IDEM	06 ORGANIZATION SHWM	07 TELEPHONE NUMBER (317) 232-8931	08 DATE 11 / 1 / 87 MONTH DAY YEAR



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE

02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ B. SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ C. CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ E. DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ F. CONTAMINATION OF SOIL

03 AREA POTENTIALLY AFFECTED: \_\_\_\_\_  
(Acres)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ G. DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ H. WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ I. POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED



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PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS *(Continued)*

01 ☐ J. DAMAGE TO FLORA  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA  
04 NARRATIVE DESCRIPTION *(include name(s) of species)*

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES  
*(Spills/runoff/standing liquids/leaking drums)*

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ N. DAMAGE TO OFFSITE PROPERTY  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

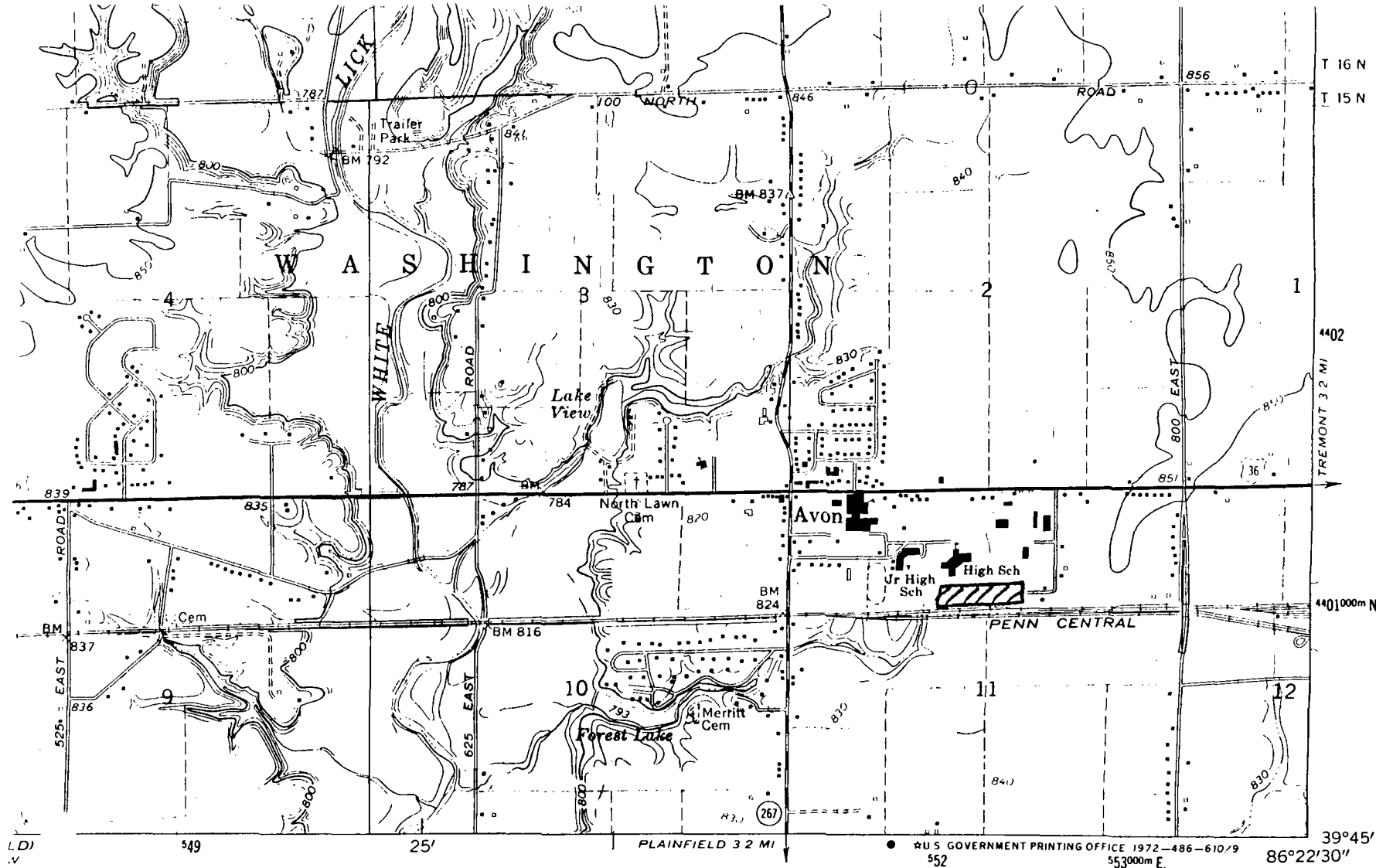
☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

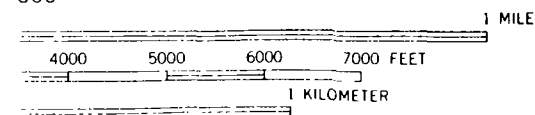
III. TOTAL POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

IV. COMMENTS

V. SOURCES OF INFORMATION *(Cite specific references, e. g., state files, sample analysis, reports)*



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10 FEET  
SEA LEVEL



MAP ACCURACY STANDARDS  
FEDERAL GOVERNMENT, WASHINGTON, D. C. 20242  
SOURCES, INDIANAPOLIS, INDIANA 46204  
ADDITIONAL SYMBOLS IS AVAILABLE ON REQUEST

### ROAD CLASSIFICATION

- |                                    |       |  |       |
|------------------------------------|-------|--|-------|
| Primary highway,<br>hard surface   | ————— | Light-duty road, hard or<br>improved surface | ————— |
| Secondary highway,<br>hard surface | ————— | Unimproved road                              | ----- |
| ○ Interstate Route                 |       | ○ U. S. Route                                |       |
|                                    |       | ○ State Route                                |       |

(BRIDGEPORT)  
3763 III NE

**BROWNSBURG, IND.**  
N3945—W8622.5/7.5

1970

AMS 3763 IV SW—SERIES V851

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